For Paperwork Reduction Act Notice, see the separate instructions.

Department of the

Internal Revenue Service

Treasury

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

2019

DLN: 93493134026181 OMB No. 1545-0047

Open to Public Inspection

		e <b>2019 ca</b> pplicable:		ear, or tax year begin	ning 07-01-2019 , and en	ding 06-30-	2020	D Emplo	ver identi	fication number
		pplicable: change		WÖRKSHOP				13-26	-	
	me ch	-	% DARYL Doing bus	MINTZ EVP & CFO				_	33/31	
	tial ret	turn n/terminated	Doing bus	silless as						
		return			ail is not delivered to street addres	ss) Room/suite	·	E Telepho	one numbe	r
□ Ар	plicatio	on pending	1900 Broa	•				(212)	595-3456	5
				wn, state or province, coun K, NY 10023	try, and ZIP or foreign postal code	•		G Gross	receints \$ 5	565,869,071
			F Name	and address of principa	l officer:		H(2) Ic	this a group r		
			STEPHEN	YOUNGWOOD				tnis a group i bordinates?	eturn for	□Yes <b>☑</b> No
			1900 Broa NEW YOR	adway .K, NY 10023			H(b) Are	e all subordina	ates	☐ Yes ☐No
<b>I</b> Ta:	x-exen	npt status:	<b>✓</b> 501(c)	(3) □ 501(c)( ) ◀(	insert no.)	☐ 527		:luded? "No." attach a	ı list. (see	instructions)
J W	ebsit	e: > www		orkshop.org	, , , , , ,			oup exemptio		•
<b>K</b> Forr	n of or	rganization:	<b>✓</b> Corpor	ation Trust Assoc	ciation Other ►	Ī	L Year of fo	ormation: 1970	M State	of legal domicile: NY
p:	art I	Sumi	marv							
				rganization's mission or	most significant activities:					
ej.	<u> </u>	OUR MISS	ION IS TO	HELP KIDS GROW SMA	RTER, STRONGER AND KINDI	ER.				
anc										
e	-									
Governance					continued its operations or di			5% of its net		1 20
			_	-	g body (Part VI, line 1a)			•	3	20
es.	l		•	-	the governing body (Part VI, endar year 2019 (Part V, line	•		•	5	1,268
Activities &				, ,	essary)	•		•	6	1,200
Act	l			•	VIII, column (C), line 12				7a	<del></del>
	l				Form 990-T, line 39				7b	
					·			Prior Year		Current Year
O.	8	Contribut	ions and gr	rants (Part VIII, line 1h)				66,175	,311	88,573,914
ž	9	Program :	service rev	enue (Part VIII, line 2g)				64,558	,691	118,900,107
Ravenue	10	Investme	nt income	(Part VIII, column (A), li	nes 3, 4, and 7d )	•		2,871	,119	1,550,815
_	11	Other rev	enue (Part	VIII, column (A), lines 5	5, 6d, 8c, 9c, 10c, and 11e)			36,292	,861	37,048,781
	12	Total reve	enue—add	lines 8 through 11 (mus	st equal Part VIII, column (A),	line 12)		169,897	7,982	246,073,617
	l				olumn (A), lines 1–3 )			14,178	-	22,785,598
	l			or members (Part IX, co					0	0
88					nefits (Part IX, column (A), lir	•		68,825	<u> </u>	72,039,544
Expenses		a Professional fundraising fees (Part IX, column (A), line 11e)						70	,000	69,516
3	l			ses (Part IX, column (D), I				62.666	274	112 210 227
	l			* **	l 1a-11d, 11f-24e) al Part IX, column (A), line 25			63,666 146,740	<u> </u>	113,310,327 208,204,985
		•		` .	om line 12	•		23,157	·	37,868,632
× 0.	-	Revenue	icss expens	ses. Subtract file 10 fre	711 IIIC 12 1 1 1 1 1	• •	Beginni	ing of Current		End of Year
et Assets or ind Balances										
Bal	20	Total asse	ets (Part X,	line 16)				393,803	,386	433,633,112
절			•	X, line 26)				98,617		92,031,632
žī				alances. Subtract line 2	1 from line 20	•		295,186	,029	341,601,480
	rt II		ature Blo		ned this return, including acc		-h - d - l			- the heat of my
					Declaration of preparer (oth					
any k	nowle	edge.								
		*****	•					2021-05-14		
Sign		Signatu	ure of officer					Date		
Here	;		MINTZ EVP							
		Туре о	r print name	and title						
		Pi	rint/Type pre	parer's name	Preparer's signature	Dat	:e	Check   if	PTIN P0074149	90
Paid		-	irmla	CDANT THORNTON				self-employed		
	pare	71	irm's name	► GRANT THORNTON LLP				Firm's EIN ►		
Use	On	ly F	irm's address	5 ► 757 THIRD AVENUE 3RI	O FLOOR			Phone no. (212	) 599-0100	)
				NEW YORK, NY 100172	2013					
May t	he IR	S discuss	this return	with the preparer show	n above? (see instructions)				. 🔽	Yes 🗆 No

Cat. No. 11282Y

Form **990** (2019)

Form	990 (2019)					Page <b>2</b>
Pa	rt III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III .		🗹
1		organization's mission:		•		
SESA	ME WORKSHOP'S MIS	SION IS TO HELP KID	S GROW SMARTE	ER, STRONGER AND KIN	DER.	
2	Did the organization	undertake any signific	ant program ser	vices during the year wh	nich were not listed on	
	the prior Form 990 o	r 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe the	ese new services on Sc	hedule O.			
3	Did the organization	cease conducting, or r	make significant	changes in how it condu	cts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedu	ıle O.			
4	Section $501(c)(3)$ an		ons are required	to report the amount of	argest program services, as mea f grants and allocations to others	
4a	(Code:	) (Expenses \$	121,913,810	including grants of \$	170,554 ) (Revenue \$	120,691,483 )
	See Additional Data					
4b	(Code:	) (Expenses \$	12,818,709	including grants of \$	1,302,498 ) (Revenue \$	212,846 )
	See Additional Data					
4c	(Code:	) (Expenses \$	9,764,673	including grants of \$	45,900 ) (Revenue \$	498 }
	See Additional Data	, (=				
	(Code:	) (Expenses \$	36,331,979	including grants of \$	21,266,646 ) (Revenue \$	0)
	humanitarian relief				· · · · · ·	· 
4d	Other program servi	ces (Describe in Sched	lule O.)			
	(Expenses \$	36,331,979 inc	luding grants of	\$ 21,266,6	46 ) (Revenue \$	0)
4e	Total program serv	vice expenses ►	180,829,1	71		

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 2	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D.</i> Part   Schedule D.Part   Schedule D.Part	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X "	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		No
b	Schedule D, Parts XI and XII	12a	Yes	NO_
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section $170(b)(1)(A)(ii)$ ? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	_

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Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Parl	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1.	Enter the number reported in Roy 2 of Form 1006. Enter -0. If not applicable 1.1 1.		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 548  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
IJ	Enter the number of Forms w-20 included in line ta. Enter -0- if not applicable .   TD   U	ı l		1

1c

Yes

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	,268		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account)?	, a 4a	Yes	
U	If "Yes," enter the name of the foreign country: ►UK, BG, SF, CA, CH, IN, IS, JA, JO  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts we not tax deductible?	re <b>6b</b>		
7				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serve provided to the payor?			No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to form 8282?	ile <b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<sup>n</sup> 7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
Ь	Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	$\dashv$		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excerparachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .  If "Yes," complete Form 4720, Schedule O.	16		No

orm 9	990 (2019)			Page <b>6</b>
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines 🗹
Sec	ction A. Governing Body and Management			
_			Yes	No
	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	Enter the number of voting members included in line 1a, above, who are independent  1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
	Did the organization have a written whistleblower policy?	13	Yes	<u> </u>
	Did the organization have a written document retention and destruction policy?	14	Yes	<u> </u>
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		 
	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt	16a		No
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , DE , DC , IN , IA , KS , KY , LA , ME , MD , MA , MI NE , NV , NH , NJ , NM , NY , NC , ND , OH SC , SD , TN , TX , UT , VT , VA , WA , WV	, MŃ , , OK ,	MS , MO	TM, C
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			_
10	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records: ▶DARYL MINTZ EVP CFO 1900 BROADWAY NEW YORK, NY 10023 (212) 595-3456			

<ul> <li>List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.</li> <li>Isist all of the organization's current key employees, if any. See instructions for definition of "key employee."</li> <li>List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations.</li> <li>List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations.</li> <li>List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations.</li> <li>Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.</li> <li>(A)  Name and title          (B)  Average hours per week (list any hours below dotted line)          (B)  Average hours per week (list any hours per week (list any hours below dotted line)          (B)  Average hours per week (list any hours below dotted line)          (C)  Average hours per week (list any hours per week list any hours per week list</li></ul>	Form 990 (2019)											Pag	ge <b>7</b>
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid.  ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (B)  Name and title  ■ (C)  Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  List all of the organization's furrent key employees, if no. See instructions for definition of "key employee."  List all of the organization's furrent key employees, if any. See instructions for definition of "key employee."  List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 from the organization and any related organizations.  List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization or any current officer, director, or trustee.  (A)  Name and title  A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee.  (B)  A Reportable compensation or trustee of the organization or trustee.  (C)  (B)  A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [	
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization.  ■ List all of the organization which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (B)  Average hours per week (list any hours for related organizations below dotted line)  ■ (C)  Reportable compensation from the organization organization organization organization organizations organi	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. See instructions for the order in which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line)  ■ Check this box if neither the organization below dotted line)  ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line)  ■ Check this box if neither the organization or any related organi	year.		•						, ,		-	n's ta	Κ
List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.      ● List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.      ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization.      ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization.      ● List all of the organization than \$10,000 of reportable compensation from the organization nor any related organization and any related organization compensated any current officer, director, or trustee.	of compensation. Enter -0- in columns (D), (	E), and (F) if no	compe	nsati	on w	/as	oaid.		.,				
who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization from the organization and any related organizations.  ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's <b>former directors or trustees</b> that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any related organization nor any neither the organization nor any neither than the organization nor any neither the organization nor any neither the organization nor any neither than the organization n													
■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.  Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  (A)  Name and title  (B)  Average hours per week (list any hours below dotted line)  (C)  (D)  (E)  Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee)  (C)  (D)  (E)  Reportable compensation from the organization (W-2/1099-MISC)  (W-2/1099-MISC)  MISC)  MISC)  (F)  Estimated amount of other compensation from the organization and related organizations organizations.													
Average hours per week (list any hours for related organizations) below dotted line)    Continue to the person of the order in which to list the persons above.    Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title  (B) Average hours per week (list any hours for related organizations below dotted line)  (B) Average hours per week (list any hours for related organizations below dotted line)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (B) Average hours per week (list any hours for related organization (W-2/1099-MISC)  (B) Reportable compensation from the organizations (W-2/1099-MISC)  MISC)  (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title  Average hours per week (list any hours for related organizations below dotted line)  Name and title  Average hours per week (list any hours for related organizations below dotted line)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	nated of oth nsation the	n
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		, ,	relate	ated	
	See Additional Data Table												
													—
													—

32 ATLANTIC AVENUE TORONTO, 0 M6K 1X8

PULP FILMS, 16 GLENEAGLES ROAD

THE JIM HENSON COMPANY,

1416 NORTH LA BREA AVENUE HOLLYWOOD, CA 90028

compensation from the organization ▶ 82

GREENSIDE, 0 2034

CA

SF

	<b>(A)</b> Name and title	(B) Average hours per week (list any hours	Average hours per than one box, unless person is both an officer and a organize for related							(D) ortable ensation on the nization	rtable Reportable nsation compensation n the from related ization organizations			ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		2/1099- IISC)	(W-2/1099- MISC)		organizati relate organiza	ed
See /	Additional Data Table				$\vdash$			+				$\top$		
					$\vdash$	$\vdash$		+				$\top$		
				$\vdash$	$\vdash$		$\vdash$	+				$\top$		
				$\vdash$	$\vdash$	$\vdash$	$\vdash$	+				$\top$		
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			<u> </u>	<del></del>	<del>  '</del>	<del> </del>	$\vdash$	+	<del> </del>		<del> </del>	+		
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<b> </b>		<u> </u>	<u> </u>	<u> </u>	—'	—'	—	$\perp \!\!\!\! \perp \!\!\!\! \perp$	<del> </del>		<u> </u>	+		
15.6			<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	$\perp$				$\dashv$		
	Sub-Total		 А.				<b>▶</b>			_		+		
	Total (add lines 1b and 1c)	<u> </u>					<u> </u>	_		.013,129		0		588,801
2	Total number of individuals (including of reportable compensation from the o			e liste	ed al	bov€	∍) who 	rece	eived mo	re than \$1	00,000			
					_		_					_	Yes	No
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>			ee, ke	ey e	mplo	oyee, d	or hic	ghest cor	mpensated -	employee on	3		NI.
4	For any individual listed on line 1a, is			comp	ens:	- atior	· · and ‹	other	r comper	sation fror	n the	3	+ +	No
	organization and related organizations	s greater than \$	150,000ء	0? <i>If</i>	"Yes	s," c	omplet	te Sc	hedule J	for such	Ture			ı
	individual				•	•						4	Yes	
5	Did any person listed on line 1a receive services rendered to the organization?					,				tion or ma	vidual for	5		No
	ection B. Independent Contract			_	_	_		_						
1	Complete this table for your five higher from the organization. Report comper											npen	ısation	
	Name :	(A) and business addre	ASS							Desc	(B) cription of services		(C) Compen	
330 W	TLED PUPPET SHOW INC, N 42ND STREET SUITE 2319 YORK, NY 10036	The Reserved								PUPPET SHO			<del></del>	,000,000
Jordan 8 SHU	n Pioneers, UKRI SHASHAA ST AN, 0 0096264640012									production s	services		2,	,161,956
NELVA	ANA LIMITED,									PRODUCTIO	ON SERVICES		2,	,110,033

PRODUCTION SERVICES

PRODUCTION SERVICES

1,383,778

1,348,572

Form **990** (2019)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

		(2019)	- f D							Page <b>9</b>
Part	VIII				respo	onse or note to anv	line in this Part VIII			🗆
		STREET TO STREET					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campa	aigns		1a	<u> </u>		revenue		512 - 514
tributions, Gifts, Grants Other Similar Amounts	ŀ	<b>b</b> Membership dues	s .	. [	1b					
Gra mot		c Fundraising even	ts .	. [	1c	1,470,340				
īş,		d Related organiza	tions	Ĺ	1d					
Gifts, nilar A		e Government grants	(cont	ributions)	1e	3,212,300				
ns, Sin	f	All other contribution	ns, gi	ifts, grants,						
utio		and similar amounts above		L	1f	83,891,274				
音音	9	Noncash contributio lines 1a - 1f:\$	ns ind	cluded in	1g					
Contributions, and Other Sim	١,	<b>h Total.</b> Add lines :	1a-1f	 f		•	00 570 044			
						Business Code	88,573,914			
	2a	EDUCATIONAL CONTI	ENT C	ISTRIBUTION		900099	118,900,107	118,212,515	687,592	
an						300039				
even	b									
⊕ 25	_									
rvic	С									
Program Service Revenue	d									
gran	e									
δ	-					-				
	f	All other program	servi	ice revenue.						
		Total. Add lines 2				118,900,107	1	T		
	<b>3</b> ]	Investment income imilar amounts)	(incl	luding divider	nds, i •	nterest, and other	1,656,274	4	42,772	1,613,502
	4 1	Income from invest				ond proceeds	•	)		
	5 F	Royalties	_				35,149,755	5	161,704	34,988,051
				(i) Real		(ii) Personal	-			
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income					1			
	d	or (loss) Net rental income	6c	loss)			<u>0</u>			
	4	Net rental income		(i) Securit		(ii) Other				_
	7a	Gross amount		.,			1			
		from sales of assets other than inventory		99,606						
	h	Less: cost or					1			
		other basis and sales expenses	7b	319,50	05,065	5				
		Cain an (lasa)	7c	1.0	)F 4F0		1			
		Gain or (loss)  Net gain or (loss)	$\sqcup \sqcup$		05,459	' <u> </u>		) )		-105,459
•		Gross income from fu	ındrai							
u e		(not including \$ contributions reported		470,340 of ine 1c).						
eve		See Part IV, line 18	•		8a	0				
۳.		Less: direct expen			8b	105,694				105.001
Other Revenue	С	Net income or (los	s) fr	om fundraisir	ng ev	ents 🕨	-105,694	+		-105,694
	9a	Gross income from								
	I.	See Part IV, line 19			9a 9b	0	_			
		Less: direct expen Net income or (los				_				
		`	,	, <u>, , , , , , , , , , , , , , , , , , </u>						
	10a	Gross sales of inve returns and allowa			10a	2,189,415				
	b	Less: cost of good			10a		_			
		Net income or (los			rvent	ory <b>&gt;</b>	<b>2</b> ,004,720	2,004,720		
		Miscellaneo	_			Business Code				
	11	a								
	b	•								
	_	,								-
	С									
	rl.	All other revenue								-
		Total. Add lines 1				•				
	12	Total revenue. S	ee in	structions .						1
			J 111			<b>•</b>	246,073,617	120,217,235	892,068	36,390,400 Form <b>990</b> (2019)

For	m 990 (2019)				Page <b>10</b>
Р	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns.	All other organization	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX	<del></del>	<u> </u>	<u> 🗆</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,674,171	15,674,171		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	7,111,427	7,111,427		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,382,257	3,936,799	268,602	176,856
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	54,695,160	40,637,113	11,664,532	2,393,515
	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,258,255	2,166,353	819,266	272,636
9	Other employee benefits	6,006,979	4,490,527	1,121,830	394,622
	Payroll taxes	3,696,893	2,545,065	889,830	261,998
	Fees for services (non-employees):	, ,	, ,		· · ·
	a Management	0			
	b Legal	1,284,448	1,024,061	251,458	8,929
	c Accounting	638,399	103,243	531,780	3,376
	d Lobbying	0			
	e Professional fundraising services. See Part IV, line 17	69,516			69,516
	f Investment management fees	1,515,571		1,515,571	
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,987,202	2,949,805	944,167	93,230
12	Advertising and promotion	1,135,849	698,508	30,595	406,746
	Office expenses	2,364,006	1,822,898	484,009	57,099
	Information technology	2,980,462	2,367,891	472,939	139,632
	Royalties	1,714,193	1,714,193	1, 2,505	
	_ ′	7,018,835	4,931,362	1,803,391	284,082
	Travel	2,365,545	2,071,008	206,941	87,596
	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,0,1,000	200/5 1.1	
19	Conferences, conventions, and meetings	590,413	275,224	307,727	7,462
20	Interest	42,443		42,443	
21	Payments to affiliates	0			
	Depreciation, depletion, and amortization	5,078,680	4,164,921	787,225	126,534
	Insurance	402,977	350,173	27,549	25,255
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a PRODUCTION EXPENSE	81,215,645	81,215,645	0	0
	b BAD DEBT EXPENSE	475,140	475,140	0	0
	c DISTRIBUTION EXPENSE	103,644	103,644	0	0
	d MISCELLANEOUS EXPENSE	396,875	0	324,801	72,074
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	208,204,985	180,829,171	22,494,656	4,881,158
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

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33

Liabilities 22

Fund Balances

ō 29

Assets 30

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

**Total assets.** Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Investments-program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Part X Balance Sneet		
Check if Schedule O contains a response or note to any line in this Part IX		 🗆
	<b>(A)</b> Beginning of year	<b>(B)</b> End of year

Page 11

19,675,523

60,094,696

175.692.995

30,408,840

7,145,372

433,633,112

42,479,323

36.989.323

0

0

0

0

12,562,986

92.031.632

275,691,080

65,910,400

341,601,480

433,633,112

Form 990 (2019)

<b>1</b> Cash-non-interest-bearing	 0	1	0
2 Savings and temporary cash investments	 16,759,772	2	49,239,094
3 Pledges and grants receivable, net	 19,978,953	3	23,782,783
4 Accounts receivable, net	 20,952,184	4	28,419,899

_	Savings and temporary cash investments 1 1 1 1 1 1 1 1 1 1	, ,	_	
3	Pledges and grants receivable, net	19,978,953	3	
4	Accounts receivable, net	20,952,184	4	
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	
_				

10a

10b

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 0 0 7 Notes and loans receivable, net . .

Assets 184.864 118,171 Inventories for sale or use . Prepaid expenses and deferred charges . 64,704,654 39,055,739

37.038,264

17,362,741

18,082,420

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160.605.979

32,436,092

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Yes

Yes (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

**Software Version:** 

**EIN:** 13-2655731

Name: SESAME WORKSHOP

Form 990 (2019)

#### Form 990, Part III, Line 4a:

world, across various media platforms including television, digital streaming, online, radio, print, mobile, and home entertainment. The content follows a whole child curriculum and is designed to give vulnerable children equal and early access to preschool learning. Sesame Workshop is most well-known for its flagship educational program "Sesame Street." The show currently broadcasts multiple times a day in the U.S. on the public broadcasting service (PBS), which is available for free in 98% of households with televisions. In addition to its presence on PBS and other television and digital platforms, "Sesame Street" videos, interactive games and other educational content are available free of charge for users on www.sesamestreet.org, www.pbskids.org and www.youtube.com. Including its distribution on broadcast, streaming vod and cable TV and its presence on various digital platforms. "Sesame Street" reaches 10.9 million kids ages 0-8 in the U.S. on a monthly basis. Its continued popularity places it as the #2 pre-school show on PBS. Sesame Streets free YouTube channel received over 2.3 billion views domestically in fiscal year 2020 (and 6.4 billion views worldwide). Research has shown that children who watch "Sesame Street" consistently perform better academically at every grade level through high school and have more developed social skills. "Sesame Street" is also seen in over 130 countries through distribution agreements with local public and commercial broadcasters. In addition, local adaptations of "Sesame Street" are produced and distributed in Germany, the Netherlands, Latin America, South Africa, India, Bangladesh, Somalia, Ethiopia and Afghanistan, The program reaches 150 million kids on a worldwide basis. In addition to the distribution of Sesame Street on mass media platforms, Sesame Workshop also leverages it media content and whole-child curriculum to reach kids in formal school settings. In FY 2020, Sesame Workshop worked with its partner, educational publisher McGraw Hill (MH), to begin implementing the workshops first integrated program incorporating critical social emotional learning (SEL) skills into MHs Wonders English Language Arts curriculum for elementary (grades K-5) students in Texas and selected districts nationwide. This year, we completed adaptations of the same curriculum program for state adoption in Florida. Placing second on the adoption list, MH will implement the program in Sept. 2021. During Covid 19, MH began promoting our Caring for Each Other resources to families through Sesame Street in Communities to all 13,000 school districts. Our other school partner, Teachstone LLC, which is the leading provider of the teacher evaluation system, Classroom Assessment Scoring System (CLASS), is now offeing continuing education credits for our professional development videos that leverage Sesame Street content. Additionally, we secured a second grant from the Chan Zuckerberg Initiative, after seeing early success with their first 3-year grant where we demonstrated gains in both early literacy as well as childrens social emotional learning (SEL) competencies. We are conducting formative and participatory research on our early childhood curriculum that is designed to embed SEL in the context emergent language and literacy development. We now have four pilot schools and over 22 classrooms, many of whom began use of the curriculum in August 2019. Weve been able to offer additional Sesame Street-based lessons for use at home during the pandemic.

Creation and Distribution of Educational Media Sesame Workshop creates educational content for preschool children and distributes that content in the U.S. and around the

### Form 990, Part III, Line 4b:

INTERNATIONAL SOCIAL IMPACT Sesame Workshop partners with local experts, including educators, donors, media organizations, government ministries and NGOs, to develop, produce and evaluate local adaptations of "Sesame Streetdirect service initiatives that are tailored to meet the specific educational needs of a particular country or region. The scope of our international social impact work ranges from country-specific initiatives -- such as in Bangladesh, South Africa, India, and Afghanistan -- to multicountry programs and regional projects with an emphasis on work in South Asia, Sub-Saharan Africa and the Middle East, Throughout Fiscal Year 2020, Sesame Workshop continued robust social impact work, expanding into new regions and thematic areas while also deepening engagement in existing countries. During the second half of FY20, Sesame Workshop proactively adapted program models and delivery mechanisms to meet the needs of young children affected by the emerging COVID-19 pandemic. Sesame Workshop also produced, adapted, and distributed new global content addressing the specific health, hygiene, and socio-emotional resilience needs of children and families. The COVID-19 pandemic required International Social Impact teams to adapt and innovate program planning and delivery to not only adjust existing program plans, but also meet the new and evolving needs of children and families with health and hygiene messaging, educational materials during school closures, and social emotional support. As part of Sesame Workshops Caring for Each Other COVID-19 response initiative, the International Social Impact team quickly distributed a series of PSAs on healthy habits that was available in 36 languages and had aired in over 95 countries by the end of Fiscal Year 2020. With support from the LEGO Foundation, we produced a global family special, Elmos World News, featuring Muppets and children from around the world sharing messages about playful learning and managing big feelings. This special premiered in June 2020 and went on to air in over 52 countries in 17 languages. In Bangladesh, Season 12 of Sisimpur premiered on national broadcaster, BTV, and Duronto TV. Bangladeshs largest childrens channel, as part of Sesame Workshops ongoing partnership with USAID. Production of 52 episodes that will make up Season 13 and 14 was completed and will air during Fiscal Years 2021 and 2022. Sesame Workshop Bangladesh celebrated its 15th Anniversary, receiving coverage by over 50 media entities and included celebration events with the US Ambassador to Bangladesh and USAID Mission Director. In partnership with the World Food Programme, we launched a storybook collaboration in Coxs Bazar distributing materials to 146 schools. In South Africa, Sesame Workshop kicked off celebration of our 20th anniversary with the launch of Season 11 of Takalani Sesame in June 2020 on public broadcaster, SABC 2. This new season includes a focus on problem solving and diversity and inclusion with all production completed in South Africa during Fiscal Year 2020. The launch and accompanying marketing and communications activities reached more than 8 million people during the campaigns first two weeks. Sesame Workshop teams continued preparation for multi-province playful learning and parental engagement interventions, however implementation was delayed due to COVID-19 school closures. In India, Galli Galli Sim Sim continued to broadcast on public broadcaster, Doordarshan, throughout Fiscal Year 2020. In light of school closures and an increased need for educational content, Galli Galli Sim Sim was broadcast five days/week on DD National, the broadcasters flagship channel. During the end of Fiscal Year 2020, the show reached a cumulative 43 million children aged 2 14. Sesame Workshop launched multiple community outreach programs in schools and Anganwadi centers focusing on themes including nutrition and early learning. Adapting to changing needs caused by COVID-19, Sesame Workshop India distributed educational materials to children and caregivers with partners including Gramvaani, ConveGenius, Thinkzone, and UNICEF. Season 7 of Baghch-e-Simsim television launched in Afghanistan in both Dari and Pashto in November 2019. New radio episodes premiered earlier in Fiscal Year 2020 across the country. The Season 7 evaluation indicated a statistically significant increase in cognition, task and object persistence, and persistence behaviors in children. We signed a new five-year broadcast agreement with the MOBY Group to guarantee continued Baghch-e-Simsim broadcast through November 2024 ensuring that the content and characters remain present in childrens lives. We expanded reach in East Africa with the television premiere of Somali language show, Sesame Sheeko, on Horn Cable TV in December 2019 and Goobjoog TV in January 2020. Through these broadcasters, the series is reaching children in Somalia, Kenya, Ethiopia, and Djibouti. After a successful TV launch, Sesame Sheeko Sheeko radio episodes premiered on local radio stations throughout Somalia, Ethiopia, and Diibouti. The 27 radio episodes focus on themes of mutual respect and understanding and air alongside a parent-facing radio show developed by our partner, Equal Access International, During the second half of Fiscal Year 2020, we began planning for a new Swahili language television show, Sesame Hadithi Njoo, a second season of Sesame Sheeko Sheeko radio episodes and created a Somali-language facilitators guide to be used in classroom intervention pilots in early Fiscal Year 2021. Sesame Workshop's "WASH UP" program expanded to India. Peru, and Rwanda with life-saving health and behavior-change education. New locally relevant video content, outreach materials and trainings were developed in partnership with World Vision. implementation of THE "WASH UP!" program CONTINUED AND is now implemented in over 15 countries and has reached more than 800,000 children. Planning began for additional expansion to Kenya and Mozambique, however COVID-19 school closures delayed implementation. We further deepened our WASH activities in Nigeria focusing on the intersection of WASH and gender with Plan International, and in Bangladesh in partnership with the World Food Programme. After beginning implementation in Fiscal Year 2019, Sesame Workshop's "WASH UP! GIRL TALK" INITIATIVE COMPLETED PILOT IMPLEMENTATION in Zimbabwe in Fall 2020, Reaching over 20,000 STUDENTS IN 150 SCHOOLS, "GIRL TALK" INTEGRATES menstrual hygiene management, resulting in positive changes in knowledge and attitudes. When tested, students in the program showed an average increase in knowledge from 58% to 81%, whereas students who did not receive the program showed no improvement. Phase Two of financial empowerment injataitye, "Dream, Save, Do" continued content development and implementation throughout Fiscal Year 2020. Ahead of COVID-19, shutdowns, a series of community events and programming was held in Japan, Mexico, and Brazil along with digital video campaigns promoting program themes. The initiative will close in February 2021. Sesame Workshop continued to adapt programming throughout the end of Fiscal Year 2020. We convened a virtual advisory for COVID-19 response in lowresource, non-US contexts with experts in early childhood, global health and pediatrics, international development, parenting, and social emotional learning. Along with the family specials special, teams adapted existing print and video materials for digital distribution and began developing new materials for distribution throughout Fiscal Year 2021.

Form 990, Part III, Line 4c: U.S. Social Impact IN ADDITION TO DISTRIBUTING ITS EDUCATIONAL CONTENT ON MASS MEDIA PLATFORMS, SESAME WORKSHOP CREATES AND DISTRIBUTES MULTI-MEDIA EDUCATIONAL INITIATIVES AND MATERIALS THAT ARE TARGETED TO SPECIFIC AT-RISK AUDIENCES OR THAT ADDRESS SPECIFIC EDUCATIONAL NEEDS. IN FY 2020, THE SESAME STREET IN COMMUNITIES (SSIC) PROGRAM TACKLED ADDITIONAL TOUGH TOPICS TO MEET THE NEEDS OF VULNERABLE CHILDREN AND FAMILIES. NEW BILINGUAL (ENGLISH/SPANISH) PARENTAL ADDICTION RESOURCES LAUNCHED IN OCTOBER 2019 INCLUDE: MUPPET VIDEOS FEATURING KARLI, A 6-YEAR-OLD MUPPET WITH A MOTHER IN RECOVERY FROM ADDICTION, DOCUMENTARY VIDEOS WITH A FAMILY IN RECOVERY, ARTICLES, PRINTABLES, A DIGITAL INTERACTIVE, AND PROVIDER WORKSHOPS FEATURING VIDEO WITH REAL PROVIDERS WORKING WITH FAMILIES. THIRTY-FIVE THOUSAND COPIES OF THE PLAY, TALK, IMAGINE STORYBOOKS WERE PRINTED AND MADE AVAILABLE FOR FREE TO COMMUNITY PARTNERS. WE ALSO HOSTED A SERIES OF FOUR WEBINARS FOR PROVIDERS, EACH FEATURING AN EXPERT WORKING WITH YOUNG CHILDREN AND FAMILIES ACROSS A VARIETY OF SECTORS. THE PROJECT GARNERED OVER 2.5 BILLION COMBINED MEDIA IMPRESSIONS WITHIN A WEEK OF LAUNCH, INCLUDING FEATURES ON TODAY SHOW, NBC NIGHTLY NEWS, A NY TIMES ARTICLE, AND MORE. IN RESPONSE TO THE COVID-19 GLOBAL PANDEMIC, SESAME WORKSHOP RESPONDED BY CREATING THE CARING FOR EACH OTHER (CFEO) INITIATIVE. THIS INITIATIVE LAUNCHED ON SESAMESTREET.ORG/CARING ON MARCH 20, 2020 AND FEATURES RESOURCES INCLUDING SESAME MUPPET VIRTUAL PLAYDATES, STREET YOUTUBE PLAYLISTS, OVER 110 FREE EBOOKS AND MORE. THE PSAS THAT LAUNCHED MARCH 20 WENT GLOBAL IN 36 LANGUAGES AND 96 COUNTRIES AND GARNERED OVER FIVE MILLION VIEWS. ON MARCH 30TH, SSIC CONTINUED TO ADD TO CFEO WITH THE LAUNCH OF HEALTH EMERGENCIES - AN ADDITIONAL NEW SUITE OF BILINGUAL (ENGLISH/SPANISH) MULTIMEDIA RESOURCES INCLUDING ANIMATIONS, PRINTABLES, AND PARENT ARTICLES. WE EXPANDED THESE RESOURCES ON APRIL 29TH, WITH NEW CONTENT BUNDLES ON EVERYDAY CHALLENGES, DESIGNED TO HELP CHILDREN IDENTIFY CHALLENGES AND EXPRESS THEMSELVES. WE ALSO CONDUCTED SURVEYS TARGETING CAREGIVERS AND PROVIDERS TO DETERMINE APPEAL AND APPLICATION OF RESOURCES. ON JUNE 15TH, WE LAUNCHED HEROES FOR HEALTH RECOGNIZING THAT FAMILIES OF ESSENTIAL WORKERS - PHARMACISTS, DOCTORS, NURSES, GROCERS, CHILDCARE PROVIDERS, FIRST RESPONDERS, AND OTHERS ARE FACING UNIQUE CHALLENGES. SINCE LAUNCH, THE SSIC HEALTH EMERGENCIES PAGE HOSTING ALL THIS CONTENT HAS BEEN THE #1 VIEWED PAGE WITH OVER 372,000 SESSIONS (FROM MARCH 30, 2020 JUNE 30, 2020) AND ACCOUNTING FOR 23% OF ALL PAGEVIEWS TO THE SITE. TO ADVISE SESAME WORKSHOP ON HOW TO BEST SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES, EXPERTS FROM A WIDE RANGE OF EXPERIENCE AND BACKGROUNDS GATHERED ONLINE JUNE 22ND, 2020 TO SHARE THEIR KNOWLEDGE ON RACIAL JUSTICE. THIS CONVENING STROVE TO ADDRESS TWO BROAD AND INTERSECTING INQUIRIES; FIRST, HOW CAN WE BEST SUPPORT OUR BLACK, AFRICAN AMERICAN, AND BROWN CHILDREN AND FAMILIES THROUGH THE TRAUMA AND GRIEF OF HISTORICALLY CONTINUING RACISM, AND SECOND, HOW WE UNDERSTAND THE CRITICAL IMPORTANCE OF STARTING EARLY WITH OUR CHILDREN AND ENGAGING ALLIES AND ADVOCATES OF ALL AGES TO CONFRONT AND TAKE ACTION AGAINST RACISM, INFORMATION GATHERED FROM THIS FIRST CONVERSATION CENTERED ON CONCEPTS OF NAMING, REFLECTING, AND COMMUNICATING, THIS INFORMATION IS CONTRIBUTING TO AN ORGANIZATION-WIDE EFFORT ON RACIAL JUSTICE, AS WELL AS SPECIFICALLY FOR THE SSIC RACIAL JUSTICE INITATIVE LAUNCHING IN FY21. WE CONTINUED OUR COMMITMENT TO PROVIDING RESOURCES TO FAMILIES, CAREGIVERS, TEACHERS AND PROVIDERS AROUND THE COUNTRY TO PROVIDE A GREATER UNDERSTANDING ABOUT AUTISM AND TOOLS TO HELP FAMILIES TOUCHED BY AUTISM. LAUNCHING IN APRIL 2020 DURING AUTISM ACCEPTANCE MONTH, NEW BILINGUAL RESOURCES INCLUDED AN ANIMATION BY EXCEPTIONAL MINDS STUDIO, A NON-PROFIT TRAINING ACADEMY AND PROFESSIONAL STUDIO PREPARING YOUNG ADULTS ON THE AUTISM SPECTRUM FOR CAREERS IN ANIMATION AND OTHER DIGITAL ARTS FIELDS. IN THE ANIMATION, JULIA AND HER BIG BROTHER SAMUEL CREATE A STORY TOGETHER ABOUT HER STUFFED BUNNY FLUFFSTER. ADDITIONAL RESOURCES INCLUDE TWO NEW DIGITAL VIDEO MOMENTS FEATURING JULIA'S FAMILY, CORONAVIRUS RELATED TIPS FOR FAMILIES WITH AUTISTIC CHILDREN, AND NEW PRINTABLE ACTIVITIES AND ARTICLES FOR PARENTS FOR SESAMESTREET, ORG/AUTISM, IN ADDITION, A SESAME STREET EPISODE FEATURING JULIA BROADCAST ON PBS AND HBO IN APRIL 2020, CENTERED AROUND LEARNING HOW TO PLAY WELL TOGETHER. IN FEBRUARY 2020, THE SSIC TEAM HOSTED OUR LOCAL PARTNERS AT THE WORKSHOP IN NEW YORK CITY. NEARLY ALL 23 PARTNER ORGANIZATIONS WERE REPRESENTED AT THE CONVENING AND AT LEAST 1 REPRESENTATIVE FROM ALL 8 COMMUNITIES WAS ABLE TO ATTEND. DURING THIS THREE-DAY WORKSHOP, PARTNERS WERE ENCOURAGED TO COLLABORATE AND BRAINSTORM WAYS TO DEEPEN THEIR IMPACT, WHILE ALSO CONNECTING WITH OTHER PARTNERS FROM ACROSS THE COUNTRY. WE ASSESSED STRENGTHS IN EACH COMMUNITY AND CELEBRATED THE "WINS", LIKE PORTABLE COMFY-COZY SPACES AND COFFEE & CONVERSATION PROGRAMMING THAT INCORPORATED SSIC. WE ALSO TALKED ABOUT THE CHALLENGES EACH COMMUNITY FACED WITH IMPLEMENTATION AND SUSTAINABILITY, WHICH HELPED SHAPE CONVERSATIONS WED LATER HAVE WITH CONSULTANTS SURROUNDING SCALING THE SSIC PROGRAM. WE CLOSED OUT THE DAY WITH A PANEL-STYLE CONVERSATION TO FIND SOLUTIONS TO THE MAIN CHALLENGES PARTNERS SHARED, WHICH ALLOWED FOR THE DEVELOPMENT OF NEW IDEAS AND CONNECTIONS. IN ADDITION TO CELEBRATING THE EXISTING 8 COMMUNITIES. SESAME STREET IN COMMUNITIES CONTINUED ONGOING DISCUSSIONS WITH REGIONAL AND LOCAL PARTNERS. EXPANDING INTO THREE ADDITIONAL COMMUNITIES THIS YEAR THROUGH A GRANT FROM THE ROBERT WOOD JOHNSON FOUNDATION, SSIC LAUNCHED IN BALTIMORE, MD, MARICOPA COUNTY, AZ, AND MIAMI, FL FOCUSING ON PARENTAL ADDICTION, TRAUMATIC EXPERIENCES, AND RESILIENCE. THIS PROJECT BEGAN IN DECEMBER OF 2019 AND WAS QUICKLY ADAPTED TO MEET THE VIRTUAL NEEDS OF PARTNERS AMID THE ONGOING PANDEMIC. RATHER THAN COMMUNITY EVENTS. EACH PARTNER ORGANIZATION PARTICIPATED IN THE FILMING OF A DIGITAL RESILIENCE SPECIAL TO AIR ON FACEBOOK AND YOUTUBE IN THE FALL OF 2020. THE SPECIAL WOULD INCLUDE KARLI, ELMO, AND ROSITA SPEAKING WITH GROWN-UPS AND EXPERTS ABOUT THE IMPORTANCE OF RESILIENCY SKILLS AND BOUNCING BACK DURING TOUGH TIMES. SESAME WORKSHOP CONTINUED ITS 16-YEAR PARTNERSHIP WITH THE PNC FOUNDATION TO CREATE BILINGUAL (ENGLISH/SPANISH) MULTIMEDIA SCHOOL READINESS MATERIALS FOR PROVIDERS, CAREGIVERS, AND CHILDREN. IN AUGUST 2019, WE ADDED FIVE PARENT MOMENT VIDEOS AND A NEW GAME WITH GOALS CENTERED AROUND EXECUTIVE FUNCTIONING SKILLS, ELMOS BRAIN GAMES TO THE SCHOOL READINESS TOPIC PAGE ON SSIC. IN APRIL 2020 WE LAUNCHED TWO VIDEOS SHOWCASING THE SCHOOL VS. HOME ROUTINES OF A PRESCHOOLER AND A KINDERGARTENER. WE ALSO LAUNCHED THE NEW BILINGUAL SESAME STREET: READY FOR SCHOOL CHALLENGE PODCASTS FEATURING ELMO AND CHRIS IN ENGLISH, AND ROSITA AND SOPHIA IN SPANISH, SIX EPISODES LAUNCHED WEEKLY FROM APRIL TO MID-MAY IN THE SCHOOL READINESS TOPIC ON SSIC AND ON ITUNES including topics such as "the very first day, ""MAKING NEW FRIENDS," "FOLLOWING DIRECTIONS," "TEACHER TALK," "RECESS, "MORNING ROUTINES". EACH PODCAST IS CUSTOMIZED FOR ENTERING PRE-K, KINDERGARTEN OR FIRST GRADE. THE PODCASTS WERE VIEWED 108,975 VIEWS FROM APRIL THROUGH JUNE. WE ALSO PRINTED 350,000 COPIES OF A NEW TRIFOLD WITH A STICKER INSERT PROMOTING THE PODCASTS. THE TRIFOLD WAS DISTRIBUTED AT PNC BANK BRANCHES AND EVENTS. THROUGHOUT THE YEAR WE ALSO CONTINUED OUTREACH FOR THE GROWING TOGETHER COURSE, LEADING TO OVER 1.890 EDUCATORS COMPLETING THE COURSE THE PAST YEAR, SESAME WORKSHOP CONTINUED, FOR ITS 15TH YEAR, ITS SESAME STREET FOR MILITARY FAMILIES (SS4MF) PROGRAM WHICH PROVIDES RESOURCES FOR MILITARY AND VETERAN FAMILIES. ON AUGUST 19, 2020 WE LAUNCHED A NEW SUITE OF RESOURCES ON FAMILY CAREGIVING TO SUPPORT BOTH MILITARY AND VETERAN FAMILIES. ON NOVEMBER 20TH, WE LAUNCHED ADDITIONAL DOCUMENTARY VIDEOS AND A PODCAST AND ON DECEMBER 9TH, WE LAUNCHED AN INTERACTIVE GUIDE FOR PROVIDERS SUPPORTING CAREGIVERS WITH THESE REOSURSES. THE LAUNCH GARNERED OVER 12 MILLION MEDIA IMPRESSIONS, AND OVER 600,000 UNIQUE VISITS AND VIDEO VIEWS TO THE SITE, ADDITIONALLY, WE LAUNCHED A NEW SS4MF YOUTUBE CHANNEL TO HOST ALL MILITARY AND VETRAN CONTENT ON MAY 2020. WE ALSO BEGAN WORK ON A NEW TOPIC: TRANISTIONS IN HEALTHCARE TO SUPPORT PSCSING FAMILIES AND CONDUCTED NEW RESEARCH ON THE SS4MF SITE. Form 990, Part III, Line 4d - Program Service, Line 4d Humanitarian Relief IN THE FACE OF GLOBAL REFUGEE CRISIS, MILLIONS OF YOUNG CHILDREN DO NOT HAVE ACCESS TO EARLY CHILDHOOD DEVELOPMENT (ECD) OPPORTUNITIES THAT THEY NEED TO LEARN, RECOVER FROM ADVERSE EXPERIENCES, AND PREPARE THEM TO THRIVE. The global COVID-19 pandemic further limited childrens access to learning, especially for more vulnerable families. DURING FY20 SESAME WORKSHOP AND THE INTERNATIONAL RESCUE COMMITTEE (IRC), WITH SUPPORT FROM THE MACARTHUR FOUNDATION and the LE

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer compensation from the from related any hours and a director/trustee) organization organizations from the

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
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PRESIDENT/CEO	2.0										
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Chief Knowledge Officer

EVP GENERAL COUNSEL

EVP STRATEGY RESEARCH&VENTURES

SVP/GM, EDU. MEDIA & LICENSING

GORDON SCOTT CHAMBERS

CHIEF DEVELOPMENT OFFICER

JOSEPH SALVO

DARYL MINTZ

....... EVP, CFO

TANYA Z HAIDER

SHEILA M KELLY

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

LLOYD N MORRISETT

RACHEL HINES

ADAM FRANKEL

FRANS HIJKOOP

MILTON CHEN phd

**TRUSTEE** 

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JEFFREY N WATANABE ESQ

CHAIRMAN EMERITUS OF THE BOARD

CHAIRMAN EMERITUS OF THE BOARD

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

**TRUSTEE** 

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Jenna Mack

Varun Chandra

Lee Eastman

Gabrielle Sulzberger

PAUL LINDLEY

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

compensation from the organization (W-2/1099-MISC)

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Kathleen G Elsesser

trustee (As of 06/17/20)

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	m 99		Complete if	the or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form 9	ion 501(c)(3) e mpt charitable 990 or Form 99	organization or trust. 00-EZ.	a section	2019
		f the Treasury	► Go to <u>w</u>	<u>ww.irs.</u>	<i>gov/Form990</i> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	<del>nie Service</del> <b>he organiza</b> RKSHOP	tion					Employer identific	ation number
								13-2655731	
	rt I				s (All organization			See instructions.	
1 ne o	organiz		•		it is: (For lines 1 thro	•		(A)(:)	
		·			sociation of churches				
2					l <b>)(A)(ii).</b> (Attach Sch 	,			
3		·			ice organization desc			-	
4		A medical r name, city,		operate	d in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated for the ( <b>iv).</b> (Complete Part i		of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
6		A federal, s	tate, or local governr	nent or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	()(v).	
7	✓		ation that normally re O(b)(1)(A)(vi). (Co			s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust described in s	section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9					scribed in <b>170(b)(1)</b> e instructions. Enter			with a land-grant coll college or university:	ege or university or a
10		from activit investment	ies related to its exer	npt fund d busine	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	ns, membership fees, than 331/3% of its su sses acquired by the c	
11					exclusively to test fo	r public safety. S	See <b>section 509</b>	(a)(4).	
12		more public	ly supported organiza	ations d		09(a)(1) or se	ction 509(a)(2	s of, or to carry out th ). See <b>section 509(a</b> s 12e, 12f, and 12g.	
a		<b>Type I.</b> A so	supporting organization	n opera ularly a <sub>l</sub>	ited, supervised, or c	ontrolled by its s	upported organiz	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting organizat	ion supe organiza	tion vested in the sar			organization(s), by ha ge the supported orga	
c		Type III f	unctionally integrat	ed. A s				nd functionally integra	ted with, its
d		Type III n	on-functionally into integrated. The orga	egrated nization	I. A supporting organi	zation operated fy a distribution	in connection wi	th its supported orgar an attentiveness req	
e		Check this	box if the organizatio	n receiv		ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organiz			-			
g	Provi	de the follow	ing information about	the sup	oported organization(	s).		_	
	(i) N	Name of supp organizatior		≣IN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
			I						
Tota			tion Act Notice, see			Cat. No. 11285		 Schedule A (Form 9	000 == \ -= : =

Page 2

	If the organization failed	to qualify unde	r the tests listed	l below, please o	complete Part II	II.)	
_ <u>s</u>	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	31,207,167	26,052,680	44,958,091	66,175,311	88,573,914	256,967,16
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
_	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 3	31,207,167	26,052,680	44,958,091	66,175,311	88,573,914	256,967,16
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on						81,436,08
	line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	<b>Public support.</b> Subtract line 5 from line 4.						175,531,08
	ection B. Total Support	1					
	Calendar year	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
_	(or fiscal year beginning in) ▶	. ,					
8	Amounts from line 4 Gross income from interest,	31,207,167	26,052,680	44,958,091	66,175,311	88,573,914	256,967,16
0	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources	36,780,081	34,264,392	34,720,789	35,273,095	36,601,553	177,639,91
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	164,988	892,068	1,057,05
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	123,325	139,200	148,500	280,500	0	691,52
11	<b>Total support.</b> Add lines 7 through 10						436,355,65
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	338,418,94
13	First five years. If the Form 990 is f	or the organization	's first, second, thi	ird, fourth, or fifth	tax year as a sec	tion 501(c)(3) orga	nization,
	check this box and <b>stop here</b>					<b>&gt;</b> 🗖	]
S	ection C. Computation of Publi						
14	D 11:			olumn (f))		14	40.227
	Public support percentage for 2018 So					15	43.541
	33 1/3% support test-2019. If the						
	and <b>stop here.</b> The organization qua <b>33 1/3% support test—2018.</b> If the	ifies as a publicly s	supported organiza	tion			. 🕨 🗹
17a	box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organization Part VI how the organization meets	t— <b>2019.</b> If the ore on meets the "facts	ganization did not s-and-circumstance	check a box on lines" test, check this	e 13, 16a, or 16b box and <b>stop he</b>	, and line 14 e <b>re.</b> Explain	▶□
b	organization .  10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati	<b>st—2018.</b> If the o zation meets the "	rganization did not facts-and-circumst	check a box on lii ances" test, check	ne 13, 16a, 16b, o this box and <b>sto</b>	or 17a, and line <b>p here.</b>	▶□
18	supported organization					and see	▶□

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010	( ) 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513  Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1	<del></del>			Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18   33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O  Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

_6	Other distributions (describe in <b>Part VI</b> ). See instruction			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in <b>Part VI</b> ). See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019

o∨ide				
10 Line 8 amount divided by Line 9 amount				
(ii) derdistributions Pre-2019	(iii) Distributable Amount for 2019			
derdistributions	Distributable			
0	vide			

8 Distributions to attentive supported organizations to widetails in <b>Part VI</b> ). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			

e From 2018. . . . . . f Total of lines 3a through e

instructions)

See instructions.

e Excess from 2019. . . . .

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2015. . . . .

**b** Excess from 2016. . . . . c Excess from 2017. . . . . **d** Excess from 2018. . . . .

Schedule A (Form 990 or 990-EZ) (2019)

Schedule A (Form 990 or 990-EZ) 2019 Page <b>8</b>								
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test							
990 Schedule A, Suppleme	ntal Information							
Return Reference	Explanation							
Form 990, Schedule A - Public Support	In addition to the public support Sesame Workshop generates to fund its own educational in itiatives in the US and around the world, Sesame Workshop also works with the Public Broad casting Service (PBS) and its local member stations to support their own public fundraisin g efforts. This support includes providing to them the use of the Sesame Street brand, cha racters, and products in fundraising campaigns, auctions, and local PBS station events. Se same Workshop does not have access to the amount of money raised from this support.							

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# Political Campaign and Lobbying Activities

OMB No. 1545-0047

**Employer identification number** 

Schedule C (Form 990 or 990-EZ) 2019

Cat. No. 50084S

13-2655731

DLN: 93493134026181

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SESAME WORKSHOP

Part I-A

2 3

1

5

(Proxy Tax) (see separate instructions), then

"political campaign activities")

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

EZ)

SCHEDULE C (Form 990 or 990-

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Political campaign activity expenditures (see instructions)

Enter the amount of any excise tax incurred by the organization under section 4955 ......

Enter the amount of any excise tax incurred by organization managers under section 4955 ......

Complete if the organization is exempt under section 501(c)(3).

Volunteer hours for political campaign activities (see instructions) ......

• Section 527 organizations: Complete Part I-A only.

- If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Schedule C

Sche	dule C (Form 990 or 990-EZ) 2019			F	Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fill Form 5768 (election under section 501(h)).	ed			
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ		Yes	No	Amou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r section	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	110
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			_	2)(6)
Гч	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				-)(0)
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	_			
_	expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
ď	art IV Supplemental Information				
	vide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); tructions), and Part II-B, line 1. Also, complete this part for any additional information.	Part II-	-A, lines :	1 and 2 (s	ee
	Return Reference Explanation				

Sesame Workshop did not engage in any lobbing activities during fiscal year 2020. Sesame Workshop files a Form 990, Schedule C, because it has made the Section 501(H) election.

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493134026181

OMB No. 1545-0047

2019

## **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

	me of the organization		Employer identification number
SES	AME WORKSHOP		13-2655731
Pa	Organizations Maintaining Donor Advi		Accounts.
	Complete if the organization answered "Ye	(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year	(a) Denot danied (and	(c) the same and control decounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
1	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex		
5	Did the organization inform all grantees, donors, and donaritable purposes and not for the benefit of the donor private benefit?	r or donor advisor, or for any other purpose cor	e used only for
Pa	rt II Conservation Easements.  Complete if the organization answered "Ye	es" on Form 990, Part IV, line 7.	
L	Purpose(s) of conservation easements held by the orga	anization (check all that apply).	
	Preservation of land for public use (e.g., recreation	on or education) $\square$ Preservation of an hi	istorically important land area
	Protection of natural habitat	☐ Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in the form	of a conservation  Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histor	ic structure included in (a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	aired after 7/25/06, and not on a historic	2d
3	Number of conservation easements modified, transferre tax year ▶	ed, released, extinguished, or terminated by th	e organization during the
1	Number of states where property subject to conservation	on easement is located <b>&gt;</b>	
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		
5	Staff and volunteer hours devoted to monitoring, inspe		
,	Amount of expenses incurred in monitoring, inspecting,	. handling of violations, and enforcing conserva	ition easements during the year
′	<b>▶</b> \$	,,,	,
3	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$ ?		(h)(4)(B)(i) ☐ <b>Yes</b> ☐ <b>No</b>
9	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the	e footnote to the organization's financial statem	e statement, and
ar	the organization's accounting for conservation easemer t III Organizations Maintaining Collections		r Similar Assets.
	Complete if the organization answered "Ye	·	
La	If the organization elected, as permitted under SFAS 1: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	r public exhibition, education, or research in fur	
b	If the organization elected, as permitted under SFAS 1: historical treasures, or other similar assets held for pub following amounts relating to these items:		
(	(i) Revenue included on Form 990, Part VIII, line 1		▶\$
	ii)Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical following amounts required to be reported under SFAS	ical treasures, or other similar assets for financ	
а	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	▶\$
b	Assets included in Form 990, Part X		

Cat. No. 52283D

Schedule D (Form 990) 2019

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part	3111	Organizations M	aintaining Col	lections o	f Art, H	istori	cal T	reası	ıres, oı	r Other	Similar A	ssets (co	ntinued)	
3		the organization's acq (check all that apply):		n, and other	records,	check a	any of	the fo	llowing t	hat are a	significant	use of its o	collection	
а		Public exhibition				d		Loan	or excha	ange prog	ırams			
b		Scholarly research				e		Othe	r					
c		Preservation for future	e generations											
4	Provid Part X	de a description of the	organization's col	lections and	explain h	ow the	y furtl	her the	e organiz	zation's ex	xempt purp	ose in		
5		g the year, did the org s to be sold to raise fur										☐ Yes		No
Par	t IV	Escrow and Cust Complete if the or X, line 21.			" on Forr	n 990	, Part	IV, li	ne 9, o	r reporte	ed an amo	unt on Fo	ırm 990	, Part
<b>1</b> a		organization an agent led on Form 990, Part										☐ Yes		No
b	If "Ye	s," explain the arrange	ement in Part XIII	and comple	te the foll	lowina	table:					Amount		
c		ning balance								1c				_
d	_	ons during the year .								1d				
е		butions during the year								1e				
f		g balance								1f				
2a		ne organization include								ccount lia	ability?	Yes		— No
b	If "Ye	s," explain the arrange	ement in Part XIII	. Check here	e if the ex	planati	on has	s been	provide	d in Part :	XIII	. 🗆		
Pa	rt V	Endowment Fun	ds.											
		Complete if the or	ganization ansv								I			
1.	Doginni	ing of year balance		(a) Curren	nt year	<b>(b)</b> P	rior yea	ar	(c) Iwo y	ears back	(d) Three ye	ears back (	<b>e)</b> Four ye	ars back
	_	ing of year balance .												
		utions												
		estment earnings, gair	•											
		or scholarships												
		expenditures for facilition	es											
f.	Adminis	strative expenses .												
g	End of	year balance												
2 a		de the estimated perce   designated or quasi-e	endowment <b>&gt;</b>	•		(line 1g	g, colu	mn (a	)) held a	s:				
h		anent endowment >												
			wment <b>&gt;</b>											
С		ercentages on lines 2a	***************************************	ld equal 100	)%.									
3a		nere endowment funds				on that	are h	eld an	d admini	istered fo	r the			
		ization by:			_								Yes	No
	<b>(i)</b> un	related organizations					•					3a(	(i)	
_	٠,	elated organizations .										3a(		1
		s" on 3a(ii), are the re						.? .				. 31	)	
4		ibe in Part XIII the inte			n's endow	ment f	unds.							
Par	t VI	Land, Buildings, Complete if the or			" on Form	~ 000	Dart	TV/ li	no 112	Coo For	rm 000 B	ort V line	. 10	
	Descrip	ption of property	(a) Cost or oth	ner basis	<b>(b)</b> Cost o						depreciation		) Book val	ue
1a	Land													
		gs												
		old improvements					22.4	14,658			9,710,340		1	12,704,31
		•						61,519			3,570,133			5,991,386
		nent	<u> </u>					52,087						979,819
e	other		1	I			3,0	JZ,UO/	1		4,082,268	1		2/2,OT,

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

19,675,523

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on I	Form 990. Part IV, line 1	1b.See Form 990.	Part X. line 12.
	(a) Description of security or category	(b) Book value	(c) Metho	d of valuation:
(1) Financial	(including name of security)  I derivatives		Cost or end-of	-year market value
(2) Closely-l (3) Other	held equity interests			
(A) HEDGE F	UNDS	63,545,342		F
(B) PRIVATE	EQUITY FUNDS	977,398		F
(C) VENTURE	E CAPITAL FUNDS	13,295,995		F
	MENTS IN POOLED FUNDS	97,874,260		F
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)  Investments—Program Related.	175,692,995		
	Complete if the organization answered 'Yes' on I	Form 990, Part IV, line 1		
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)				Value
(2)				
(3)			+	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col.(B) line 13.)		<b>•</b>	
Part IX	Other Assets.	aura 000 Park IV line 1:		+ V 1: 45
	Complete if the organization answered 'Yes' on F  (a) Descriptio		IG. See Form 990, Pa	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			<b>•</b>
Part X	<b>Other Liabilities.</b> Complete if the organization answered 'Yes' on F	orm 990, Part IV, line 1:	le or 11f.See Form	
1.	(a) Description of l	iability		<b>(b)</b> Book value
	income taxes ED RENT PAYABLE			12,562,986
(3)				
(4)				
(4) (5) (6)				
(5)				
(5)				
(5) (6) (7)				
(5) (6) (7) (8)				
(5) (6) (7) (8) (9) (10)	n (b) must equal Form 990, Part X, col.(B) line 25.)			12,562,986

Schedule D (Form 990) 2019

Page 4

	Complete if the organi	ization answered "Yes" on Form 990, Part	. IV, I	ine 12a.		_
1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.) $\ .$		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.) .		4b			
C	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.)			5	
Par		penses per Audited Financial Statem ization answered 'Yes' on Form 990, Part			Return	1.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.) .		2d			
е	Add lines 2a through 2d		•		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.) .		4b			
С	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total expenses. Add lines 3 and 4	4c. (This must equal Form 990, Part I, line 18.	) .		5	
Pai	t XIII Supplemental Info	ormation				
Pro	vide the descriptions required for P lines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and 4 s 2d and 4b. Also complete this part to provide	4; Par any a	t IV, lines 1b and 2b; Par additional information.	t V, line	4; Part X, line 2; Part
	Return Reference		Ex	planation		
See A	Additional Data Table					
		<del>                                     </del>				

chedule D (Form 990) 2019	Page <b>5</b>
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

### **Additional Data**

Software ID: Software Version:

**EIN:** 13-2655731

Name: SESAME WORKSHOP

Explanation

Supplemental Information

Return Reference

FIN 48 FOOTNOTE - ASC 740: INCOME TAXES	THE COMPANY FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITION S TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO CONSOLIDATED FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFE CTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL ST ATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY O N THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSI TION MAY BE CHALLENGED. THE COMPANY IS EXEMPT FROM INCOME TAX UNDER IRC SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. THE COMPANY HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DET ERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDEN TIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE COMPANY HAS DETE RMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISC LOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.

SCHEDULE F	State	ement of A	Activities	Outside the Un	ited St	ates	OMB No. 1545-0047
(Form 990)	•	-	ganization answered "Yes" to Form 990, Part IV, line 14b, 15, o  ▶ Attach to Form 990.  .irs.gov/Form990 for instructions and the latest information.				2019 Open to Public
Department of the Treasury Internal Revenue Service			, ,				Inspection
Name of the organization						Employer iden	tification number
						13-2655731	
	<b>nformation</b> Part IV, line		Outside the U	<b>United States.</b> Comple	ete if the o	organization a	nswered "Yes" on
•		-		substantiate the amoun stance, and the selection	_		
				· · · · · · · · ·			☑ Yes □ N
2 For grantmakers outside the United		Part V the orga	anization's proce	edures for monitoring the	use of its	grants and otl	her assistance
<b>3</b> Activites per Region	n. (The followin	ng Part I, line 3	table can be dupli	icated if additional space is	needed.)		
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	fundraising, program	program s	ty listed in (d) is a service, describe ific type of s) in the region	(f) Total expenditures for and investments in the region
				region)			
See Add'l Data				region)			
See Add'l Data				region)			
See Add'l Data				region)			
See Add'l Data  3a Sub-total b Total from continuat Part I		1	. 42				171,659,0

Schedule F (Form 990)	2019						•	Page <b>2</b>		
	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
		South Asia	PROGRAM IMPL	6,905,606						
		South Asia	GENERAL SUPP	114,000						
		South America	GENERAL SUPP	91,821						
<u> </u>	<u></u>									
			d above that are recogr ounsel has provided a se				•			
3 Enter total number	er of other or	nanizations or entit	ies				<i></i>			

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	( <b>b)</b> Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>☑</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	<b>☑</b> Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	· ·	<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	<b>☑</b> No

Schedule F (Form 990) 2019

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting

method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide

## 990 Schedule F, Supplemental Information

any additional information. See instructions.

Return Reference	Explanation
Schedule F	Part I, Line 1 - Monitoring of Foreign Grantees. Sesame Workshop adopts a comprehensive procedure to ensure that the organizations it provides grants to are performing services and holding programs that align with the Workshop's tax-exempt mission. The Workshop's due diligence procedures are described, likewise, in Schedule I. For foreign grantees. The Workshop conducts a pre-grant risk assessment to ensure that the organization's programmatic capabilities, policies and financial controls align with the programmatic objectives of the grant. The Workshop monitors the use of these funds throughout the year, requiring PERIODIC PROGRESS REPORTS (PER A PRE-DEFINED SCHEDULE AND PRE-ESTABLISHED PARAMETERS), with a concluding financial report at year end. As needed, Sesame Workshop personnel will conduct site visits to monitor the effectiveness of supported programs. The Workshop RESERVES THE RIGHT TO REQUEST ANY ADDITIONAL REPORTING AS NEEDED TO SATISFY THE ORGANIZATION THAT FUNDS ARE USED FOR EXEMPT CHARITABLE PURPOSE, as well as to conduct audits of the grant spending. PART IV SESAME WORKSHOP INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE WORKSHOP'S

TO THE EXTENT ANY OF THESE FORMS ARE COMPLETED, THEY HAVE BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. IN ADDITION, SESAME WORKSHOP IS THE PARENT ORGANIZATION TO VARIOUS FOREIGN SUBSIDIARIES FOR WHICH A FORM 5471 MAY BE REQUIRED.

#### **Additional Data**

Europe (Including Iceland and

Greenland)

Form 900 Schedule E Part T - Activities Outside The United States

#### Software ID: Software Version:

**EIN:** 13-2655731

Name: SESAME WORKSHOP

DIST. OF EDUCTN. MEDIA

4,006,298

roi ili 990 Schedule r Pai	of it 1990 Schedule F Part 1 - Activities Outside The Officer States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
East Asia and the Pacific	0	6	Program Services	DIST. OF EDUCTN. MEDIA	8,966,214				

4 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 0 Program Services DIST. OF EDUCTN. MEDIA 455,113 North America 8 Program Services DIST. OF EDUCTN. MEDIA 3,178,403

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Sub-Saharan Africa 0 Program Services DIST. OF EDUCTN. MEDIA 3,056,749 South America 8 Program Services DIST. OF EDUCTN. MEDIA 2,267,218

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 16 Program Services DIST. OF EDUCTN. MEDIA 3,143,544 South Asia Grantmaking 7,019,606

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South America Grantmaking 91.821 Central America and the Investments 131,815,224 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region region recipients located in the reaion) Europe (Including Iceland and 7,658,816 Investments Greenland)

DLN: 93493134026181 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. **Open to Public** Department of the Treasury ► Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** SESAME WORKSHOP 13-2655731 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No **EVENT ASSOCIATES INC** GALA 162 w 56th street 405 69,516 Nο -69,516 new york, NY 10019 69,516 -69,516 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. All States For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

Fe	<b>Fundraising Events.</b> Complethan \$15,000 of fundraising e				
	gross receipts greater than \$5		<b>(b)</b> Event #2	(c)Other events	(d) Total events
		SW ANNUAL GALA		0	(add col. (a) through col. (c))
Revenue		(event type)	(event type)	(total number)	
	1 Gross receipts	1,470,340			1,470,340
	2 Less: Contributions	1,470,340			1,470,340
	3 Gross income (line 1 minus line 2)	1,470,340			1,470,340
	4 Cash prizes				
တ္	5 Noncash prizes				
Direct Expenses	<b>6</b> Rent/facility costs				
ă X	<b>7</b> Food and beverages				
<u>ਲ</u>	8 Entertainment	5,122			5,122
	9 Other direct expenses	100,572			100,572
2	- Other direct expenses				
ă	10 Direct expense summary. Add lines 4 t	,			105,694
	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10	hrough 9 in column (d) from line 3, column (d)			-105,694
	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  t III Gaming. Complete if the orga	hrough 9 in column (d) from line 3, column (d)	s" on Form 990, Part I		-105,694
Par	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10	hrough 9 in column (d) from line 3, column (d)	s" on Form 990, Part I  (b) Pull tabs/Instant bingo/progressive bingo		-105,694
Par	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue  2 Cash prizes  3 Noncash prizes	hrough 9 in column (d) from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue  2 Cash prizes  3 Noncash prizes	hrough 9 in column (d) from line 3, column (d) anization answered "Ye  (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the orga on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d)  from line 3, column (d)  anization answered "Ye  (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo  Yes %	(c) Other gaming	-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye  (a) Bingo  Yes %  No  hrough 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No	(c) Other gaming  Yes % No	-105,694 d more than \$15,000 (d) Total gaming (add
s Revenue a	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the organization in the composition on Form 990-EZ, line 6a.  1 Gross revenue	hrough 9 in column (d)  from line 3, column (d)  anization answered "Ye  (a) Bingo  Yes	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No  n (d)	(c) Other gaming  Yes % No	-105,694 d more than \$15,000  (d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 2019					Page 3
11	Does the organization conduct gami	ng activities with nonmember	rs?		☐ Yes ☐	No
12	Is the organization a grantor, benef formed to administer charitable gan	. <u>.</u>	a member of a partnership or other entity		□ Yes □	
13	Indicate the percentage of gaming a	activity conducted in:			L les L	110
а	The organization's facility			13a		%
b	An outside facility			13b		%
14	Enter the name and address of the	person who prepares the orga	anization's gaming/special events books and re	cords:		
	Name •					
	Address P					
15a	Does the organization have a contra revenue?		om the organization receives gaming			
b		g revenue received by the org	ganization $ black $$ and th	ie .	☐ Yes ☐	No
С	If "Yes," enter name and address of					
	Name •					
	Address ▶					
16	Gaming manager information:  Name					
	Gaming manager compensation	j				
	Description of services provided ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor			
17 a			listributions from the gaming proceeds to		□Yes □I	No
b	Enter the amount of distributions re	quired under state law distrib	outed to other exempt organizations or spent		L 103 L 1	10
	in the organization's own exempt ac					
Pai	rt IV Supplemental Informa III, lines 9, 9b, 10b, 15b	<b>tion.</b> Provide the explana , 15c, 16, and 17b, as app	tions required by Part I, line 2b, columns plicable. Also provide any additional infor	s (iii) ar mation	nd (v); and P . See instruc	art tions.
	Return Reference		Explanation			
Sche	dule G, PART I	honor guests who support was cancelled. Some of outhose revenues are report for these events and has a professional FUNDRAISIN ADMINISTRATIVE SERVIC EVENT ASSOCIATES INC I	demic, Sesame Workshops annual gala to cele t the workshop's mission of helping kids grow sur very generous donors continued to support ted in Schedule G. Sesame Workshop incurred allocated them accordingly in Schedule G, Part G COUNSEL TO PARTICIPATE IN THE EVENT P TES ASSOCIATED WITH THE EVENT. IN THE IN HAS BEEN REPORTED IN SCHEDULE G EVEN T FUNDRAISING ACTIVITIES.	smarter, our func some no t II. Sesa LANNINO ITEREST	, stronger and I draising efforts on-reimbursab ame Workshop G AND TO PRO' OF FULL DISC	kinder and le costs hires VIDE LOSURE,

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

(Form 990)

Department of the

## **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

DLN: 93493134026181

Open to Public Inspection

Treasury Internal Revenue Service		► Go to <u>ww</u>	<u>w.irs.gov/Form990</u> for	the latest information	on.		
Name of the organization						Employer	identification number
SESAME WORKSHOP						13-2655	731
		and Assistance					
Does the organization mai the selection criteria used						ce, and	☑ Yes ☐ N
2 Describe in Part IV the org	•						
			nd Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes'	on Form 990, Part	t IV, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descriptic noncash assist	
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
<ul><li>2 Enter total number of sect</li><li>3 Enter total number of other</li></ul>		-					10
For Paperwork Reduction Act Noti				Cat. No. 5005			Schedule I (Form 990) 2019

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2019

Part III

(1)			
(2)			
(3)			
(4)			

(5) **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(6) (7) Part IV **Explanation** Sesame Workshop awards sub-grants to support its programmatic work. For these sub-grants, The Workshop conducted pre-grant risk assessments to ensure that the organization's programmatic capabilities, policies and financial controls align with the programmatic objectives of the grant. The Workshop monitors the use of these funds throughout the year, requiring PERIODIC PROGRESS REPORTS (PER A PRE-DEFINED SCHEDULE AND PRE-ESTABLISHED PARAMETERS), with a concluding financial report at year end. As needed, Sesame Workshop personnel will conduct site visits to monitor the effectiveness of supported programs. The Workshop RESERVES THE RIGHT TO REQUEST ANY ADDITIONAL REPORTING AS NEEDED TO SATISFY THE ORGANIZATION THAT FUNDS ARE USED FOR EXEMPT CHARITABLE PURPOSES, as well as to conduct audits of the grant spending. In addition, Sesame Workshop supports organizations through their galas and other special event activities. To the extent that the payment to these organizations represents a contribution (beyond the goods and services received), Sesame reports these amounts as contributions on Schedule I. Sesame Workshop's PRESIDENT of social impact & philanthropy selects those organizations whose mission is either supported or aligned with the workshop's mission. The contribution is approved by the President/CEO of Sesame Workshop. These amounts are generally immaterial and do not require

Return Reference Schedule I, Part II ladditional monitoring. Page **2** 

### Additional Data

Concordia Summit Inc

404 5th Ave Ste 501 new york, NY 10018 John F Kennedy Center for

Performing Arts 2700 F Street NW Washington, DC 20566

Software ID: Software Version:

**EIN:** 13-2655731

Name: SESAME WORKSHOP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation

organization	(-,	if applicable	grant	cash	(book, FMV, appraisal,
or government			_	assistance	other)

501(c)(3)

501(c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

27-5121564

58-6033837

20,000

18,400

non-cash assistance

(g) Description of

(h) Purpose of grant or assistance

general support

General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government US Fund for UNICEF 13-1760110 501(c)(3) 10.000 General Support 125 Maiden Lane 11TH fl New York, NY 10038

General Support

11.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

The Church of St Paul The

405 W 59th Street New York, NY 10019

Apostle

11-2730714

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 13-6274650 501(c)(3) 6.500 New York Women in general support Communication Foundation 355 Lexinaton Avenue New York, NY 10017

Center for US Global 74-3093659 501(c)(3) 30.000 general support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Leadership 1129 20th Street Washington, DC 20036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

INTERNATIONAL RESCUE	13-5660870	501(c)(3)	11,803,347		prGM. implementation
COMMITTEE					
122 E 42ND STreet					
new york, NY 10168					

New York University 13-5562308 501(c)(3) 2,557,693 prgm. implementation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

105 east 17th st new york, NY 10003

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 26-2810489 501(c)(3) 170.554 WNET - THIRTEEn prGM. implementation

825 eightH avenue new vork, NY 10019 Sesame Workshop 83-1810098 501(c)(3) 1.046.677

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Igeneral support International 1900 broadway new vork, NY 10019

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49313	34026	181		
Sch	nedule J	Co	mpensati	ion Information	0	MB No.	1545-0	0047		
(For	m 990)	For certain Office		rustees, Key Employees, and Hig ated Employees	hest	20	11(			
		► Complete if the org		vered "Yes" on Form 990, Part IV o to Form 990.	, line 23.	2019				
•	tment of the Treasury	► Go to <u>www.irs.go</u>		instructions and the latest inform	mation.	Open (				
	al Revenue Service ne of the organiza	l ation			Employer identifica		ectio Imber			
SES	AME WORKSHOP				13-2655731					
Pa	rt I Questi	ons Regarding Compensa	tion		13-2033731					
							Yes	No		
<b>1</b> a				f the following to or for a person liste y relevant information regarding the						
	First-class	or charter travel		Housing allowance or residence for	personal use					
	_	companions	님	Payments for business use of perso						
		nification and gross-up payments	s L	Health or social club dues or initiation						
	☐ Discretion	ary spending account	Ц	Personal services (e.g., maid, chaut	feur, chef)					
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b				
2				or allowing expenses incurred by all	20 122	2				
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne la?					
3				ed to establish the compensation of the check any boxes for methods	he					
				CEO/Executive Director, but explain	in Part III.					
	<b>✓</b> Compensa	ation committee		Written employment contract						
	☑ Independ	ent compensation consultant	<b>✓</b>	Compensation survey or study				1		
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	ition committee					
4	During the year related organiza		990, Part VII <i>,</i> Se	ction A, line 1a, with respect to the f	iling organization or a					
а	Receive a sever	ance payment or change-of-cont	trol payment? .			4a	Yes			
b	Participate in, o	r receive payment from, a suppl	emental nonqual	ified retirement plan?		4b		No		
c		' ' '	, ,	nsation arrangement?		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	plicable amounts for each item in Par	t III.					
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.						
5			_	the organization pay or accrue any						
	compensation c	ontingent on the revenues of:								
а	The organization	1?				5a		No		
b	-	anization?				5b		No		
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any						
а	The organization	1?				6a		No		
b						<b>6</b> b		No		
	•	6a or 6b, describe in Part III.								
7	For persons liste payments not d	ed on Form 990, Part VII, Sectio escribed in lines 5 and 6? If "Yes	n A, line 1a, did t s," describe in Pa	the organization provide any nonfixe rt III	d 	7	Yes			
8	subject to the ir	nitial contract exception describe	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," documents in the contract of the contra		8		No		
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		INO		
For F	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 5	50053T Schedule	l (Forn	1 990)	2019		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report instructions, on row (ii). Do not list any individuals that are not listed on Form 99	compen: 30. Part	sation fro VII.	om the organization	on row (i) and fro	m related organiza	tions, described i	n the	
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	tal amou	ınt of Fo	rm 990, Part VII, Se	ection A, line 1a, ap				
(A) Name and Title	(	( <b>B)</b> Breal	kdown of W-2 and/o compensation	or 1099-MISC	(C) Retirement and other	( <b>D)</b> Nontaxable benefits	columns	(F) Compensation in
	(i) comp	Base ensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								
	_							
	+-							

Schedule J (Form 990) 2019

Compensation

Schedule J is based on amounts reported on the Forms W-2 for the year ended December 31, 2019. The amounts in each column on schedule J represent the following: Column B(i): Base compensation reduced by pre-tax deductions to medical or other cafeteria benefits Columns B(ii): Incentive compensation received in calendar year 2019 Columns B(jii): non-traditional payments such as a vacation payout, employer contributions to group term life insurance in excess of \$50k, as well as severance payments (when applicable) Column C: Employer contributions to 401k plan Column D: Employer and employee contributions towards nontaxable benefits, including medical insurance, dental insurance, flexible spending accounts, etc. Schedule J, Part I, line 4a Chief Knowledge Officer, Michael Levine, received a severance payment in calendar year 2019; this amount is reported in Schedule J. Part II. Column (b)(iii). Schedule J. Part I. Line 7 SESAME WORKSHOP MAINTAINS A TARGETED INCENTIVE COMPENSATION PROGRAM WHICH FULL TIME STAFF EMPLOYEES ABOVE A CERTAIN 10b LEVEL ARE ELIGIBLE. THE TARGET AMOUNT OF EACH EMPLOYEE'S INCENTIVE COMPENSATION IS BASED ON A COMBINATION OF JOB LEVEL, INDIVIDUAL PERFORMANCE AND organization PERFORMANCE. THE BOARD OF TRUSTEES DETERMINES WHETHER INCENTIVE COMPENSATION PAYMENTS WILL BE MADE FOR EACH GIVEN YEAR AND THE TOTAL

Schedule 1 (Form 990) 2019

Page 3

5SHERRIE WESTIN

GORDON SCOTT CHAMBERS SVP/GM, EDU. MEDIA &

CHIEF DEVELOPMENT

8TANYA Z HAIDER

**EVP STRATEGY** RESEARCH&VENTURES

9George E Wells

EVP, CREATIVE & **PRODUCTION** 

SVP, Head of Intl Media &

10Kay N Wilson Stallings

Michael H Levine Thru 1019 Chief Knowledge Officer

President global impact&PHILAN

LICENSING 7SHEILA M KELLY

OFFICER

Educ

11

(i)

(ii)

(i)

(ii)

(ii)

(i)

(ii)

(i)

Software ID: **Software Version:** 

**EIN:** 13-2655731

Name: SESAME WORKSHOP

(A) Name and Title		(B) Breakdown	n of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990		
1JEFFREY DUNN PRESIDENT/CEO	(i)	676,257	223,300	3,861	28,000	31,966	963,384	0		
	(ii)	<u> </u>	0	1 0	0	0	0	0		
1DARYL MINTZ EVP, CFO	(i)	337,959	101,136	534	28,000	41,658	509,287	0		
l	(ii)	o <sup> </sup>	0	1	ا	0	0	0		
2JOSEPH SALVO EVP GENERAL COUNSEL	(i)	344,190	107,800	5,110	28,000	41,432	526,532	0		
	(ii)	ol	0	1	o	0	0	0		
3JEAN BROWN JOHNSON EVP/CREATIVE DIR. (thru	(i)	398,674	123,200	5,380	28,000	14,185	569,439	0		
05/20)	(ii)	0	0	1 0	0	0	0	0		
<b>4</b> STEphen YOUNGWOOD president, media & edu. &	(i)	469,825	144,760	1,180	28,000	7,712	651,477	0		
COO	(ii)	0	0	0	1 0	1 0	0	0		

3,237

730

479

495

482

1,260

189,233

28,000

25,258

16,012

16,000

27,961

17,033

20,896

5,772

34,713

37,308

42,925

13,685

4,186

22,099

628,624

458,236

451,454

468,442

449,153

399,147

526,755

0

PRESIDENT/CEO						
	(ii)	o	0	0	0	
1DARYL MINTZ EVP, CFO	(i)	337,959	101,130	534	28,000	4
	(ii)	o	0	0	0	

138,600

91,738

92,351

94,080

92,808

85,848

59,000

453,015

305,797

305,304

314,942

314,217

290,820

235,527

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

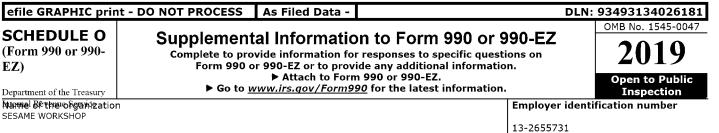
efile GRAPHIC	C print - DO N	IOT PROCES	S As I	iled Data -					DL	.N: 93	4931	3402	26181	
Schedule L		Tran	sactio	ns with li	ntereste	d Persor	าร			OI	OMB No. 1545-0047			
(Form 990 or 990	-EZ) ► Compl	ete if the org	anization	answered "Yes	s" on Form 9	90, Part IV, li	ines 2	5a, 2	25b, 26	5,	2019			
			► Atta	ch to Form 99	0 or Form 99	0-EZ.								
Department of the Trea Internal Revenue Servi		•Go to <u>www.ii</u>	rs.gov/Fo	<i>r</i> 990 for inst	ructions and	the latest in	torma	tion.		(	Open t Insp			
Name of the orga							Er	nplo	yer ide	ntifica	ition n			
SESAME WORKSHO	iP						13	-265	5731					
Part I Exce	ss Benefit Tra	ansactions (	section 50:	l(c)(3), section	501(c)(4), and	d section 501(c				s only)	).			
	ete if the organi													
1 (a	) Name of disqua	alified person	(b)	Relationship be	etween disqua organization	lified person ar	nd		escript ansacti				ected?	
				organization									NO	
							_							
							+							
2 Enter the ar	nount of tax incu	irred by the or	nanization	managers or dis	gualified perso	ons during the	Vear I	ınder	section	<u> </u>				
4958						_	•		<b>&gt;</b>	\$				
<b>3</b> Enter the ar	nount of tax, if a	ny, on line 2, a	above, rein	nbursed by the o	rganization .		•			\$				
Con	ans to and/or plete if the organization and an amount	nization answe	red "Yes" o	on Form 990-EZ	, Part V, line 3	38a, or Form 99	90, Pai	rt IV,	line 26	; or if	the org	anizat	tion	
(a) Name of							(g)	(g) In (h)						
interested person	with organizatio	on of loan	org	anization?	principal amount	due	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Appro	ved by agreement		ent?		
					annount		l l		nittee?					
			То	From			Yes	No	Yes	No	Yes	I	No	
Total .		· · · ·	<u> </u>		<b>\$</b>									
Part IIII Gra	nts or Assista plete if the or	ance Benerit nanization an	:I <b>ng Inte</b> swered "\	r <b>estea Perso</b> /es" on Form <sup>(</sup>	<b>ns.</b> 990 Part IV	line 27								
(a) Name of inter		<b>b)</b> Relationship		(c) Amount		(d) Type (	of assi	stanc	e	<b>(e)</b> Pu	rpose o	f assi:	stance	
	ii	nterested perso												
		organizat	.1011											
				1		1								
For Paperwork Red	ustion Act Notice	soo the Instru	ctions for E		<b>-7</b> C-	at. No. 50056A		C-1		(F	990 or	000	>	

	organization			reven	iues?
				Yes	No
(1) Jeffrey Weiss	Board Member	591,000	See Sch L Narrative		No
(2) Sherrie Westin	Key Employee	175,800	See Sch L Narrative		No
Part V Supplemental In	formation				

Part V Supplemental Information											
Provide additional information for responses to questions on Schedule L (see instructions).											
Return Reference			Explanation	on							

ITHIS ORGANIZATION. THE WEISS FAMILY DIVESTED ITSELF OF THEIR MAJORITY CONTROLLING INTEREST IN FEBRUARY OF 2018, but still maintains a minority share in excess of 35%. A Family Member of Key employee, Sherrie Westin, owns an organization that provided market research services to Sesame Workshop. During Fiscal Year 2020, Sesame Workshop paid that organization \$175,800. Sesame Workshop engaged the services of this vendor without any input from Ms. Westin. The transaction was disclosed to the

Board of Directors pursuant to the Workshop's conflict of interest process. Schedule L (Form 990 or 990-EZ) 2019



990	Schedule	ο,	Supplemental	Information

Return Reference	Explanation
EXPLANATORY NOTE CONCERNING THE COVID-19 PANDEMIC	THE COVID-19 PANDEMIC, WHOSE EFFECTS FIRST BECAME KNOWN IN JANUARY 2020, IS HAVING A BROAD AND NEGATIVE IMPACT ON COMMERCE AND FINANCIAL MARKETS AROUND THE WORLD. THE EXTENT OF THE IMPACT OF COVID-19 ON THE COMPANY'S OPERATIONAL AND FINANCIAL PERFORMANCE WILL DEPEND ON CERTAIN DEVELOPMENTS, INCLUDING THE DURATION AND SPREAD OF THE OUTBREAK AND ITS IMPACT ON, LICENSING AND DISTRIBUTION PARTNERS, CONSUMERS, DONORS, EMPLOYEES AND VENDORS, ALL OF WHI CH AT PRESENT CANNOT BE DETERMINED, ACCORDINGLY, THE EXTENT TO WHICH COVID-19 WILL IMPACT THE COMPANY'S FUTURE CONSOLIDATED FINANCIAL POSITION AND CHANGES IN NET ASSETS AND CASH FLOWS is uncertain. Gross Receipts Explanation Gross Receipts reported on Form 990, Page 1, Box G includes, in addition to revenues, the gross sale proceeds of Sesame Workshops invest ment portfolio. The Workshop changed its oxide investment advisers in fiscal 2020, resulting in a transition of its underlying investments; accordingly, its gross receipts number includes \$319,399,606 in investment sales proceeds (as reported in Part VIII, Line 7a of the Form 990), all of which were re-invested in the same period. Form 990, part V, Line 1 a THE NUMBER OF 1099S ISSUED IN ANY GIVEN YEAR IS DEPENDENT ON THE NUMBER AND SIZE OF PROJECTS UNDERTAKEN, Form 990, part V, Line 2 a THE NUMBER OF EMPLOYEES REPORTED IN CALENDAR YE AR 2019 TOTALING 1,268 REFLECTS ALL INDIVIDUALS EMPLOYED FOR ANY PART OF THE YEAR. IT ALSO INCLUDES PAYMENTS TO PRODUCTION TALENT FOR REUSE AND RE-AIRING OF PREVIOUSLY PRODUCED CON TENT. GIVEN THE VARIABLE NATURE OF PROJECT AND PRODUCTION ACTIVITIES, THE TOTAL EMPLOYEES REPORTED may vary significantly year to year. Form 990, part VI, Section A, Line 2 BOARD OF TRUSTEES MEMBER, JOAN GANZ COONEY, AND BOARD OF TRUSTEES MEMBER, MICHAEL MANASSE, HAVE A BUSINESS RELATIONSHIP. PART VI, SECTION B, LINE 11A SESAME WORKSHOP'S FORM 990 IS PREPARE D BY THE ORGANIZATION'S INTERNAL ACCOUNTING EPERATMENT IN CONJUNCTION WITH A NATIONALLY RE COGNIZED ACCOUNTING FIRM. UPON COMPLETION, THE FORM 990 IS D

Return Explanation
Reference

990 Schedule O, Supplemental Information

PANDEMIC

EXPLANATORY ICIPATING IN ANY DELIBERATIONS AND DECISIONS RELEVANT TO THE DISCLOSURES.

NOTE
CONCERNING
THE COVID-19

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 15A AND 15B	EACH YEAR, THE PERSONNEL & COMPENSATION COMMITTEE OF THE BOARD - COMPRISED OF A MAJORITY OF INDEPENDENT TRUSTEES - REVIEWS THE ORGANIZATION'S COMPENSATION PHILOSOPHY AND WORKS WITH AN INDEPENDENT, THIRD PARTY COMPENSATION CONSULTING FIRM TO COLLECT COMPARABLE MARKET DATA TO SET APPROPRIATE SALARY RANGES FOR EACH OF THE POSITIONS HELD BY THE OFFICERS AND KEY EMPLOYEES. IN SO DOING, THE COMMITTEE TAKES INTO CONSIDERATION THE COMPETITIVE LABOR MARKETPLACE FOR SUCH POSITIONS AND THE COMPARABILITY DATA IN THE NOT-FOR-PROFIT AND, IN SOME INSTANCES THE FOR-PROFIT SECTORS, AS APPLICABLE. WITH RESPECT TO THE CEO POSITION, THE COMMITTEE TAKES INTO CONSIDERATION THE COMPARABILITY DATA IN BOTH THE NOT-FOR-PROFIT AND FOR-PROFIT SECTOR. THE ANNUAL JOB PERFORMANCE FOR EACH OFFICER AND KEY EMPLOYEE ARE REVIEWED AND ANY CHANGES IN THE BASE COMPENSATION AND/OR ANY INCENTIVE AWARDS AS DETERMINED THROUGH SESAME WORKSHOP'S TARGETED INCENTIVE PROGRAM ARE REVIEWED AND APPROVED. THE CEO'S ACTUAL JOB PERFORMANCE IS REVIEWED BY THE PERSONNEL AND COMPENSATION COMMITTEE AND EVALUATED BY THE FULL BOARD OF TRUSTEES. THE REVIEW INCLUDES A SURVEY THAT GATHERS INPUT FROM ALL TRUSTEES. ANY RECOMMENDED INCENTIVE COMPENSATION AWARD OR SALARY CHANGE IS DETERMINED IN CONSULTATION WITH THE INDEPENDENT COMPENSATION CONSULTANT. THE RECOMMENDATION IS PRESENTED TO THE FULL BOARD OF TRUSTEES FOR APPROVAL. THE DELIBERATIONS AND DECISIONS OF THE PERSONNEL & COMPENSATION COMMITTEE, AS WELL AS THE FULL BOARD OF TRUSTEES WITH RESPECT TO THE CEO'S PERFORMANCE AND COMPENSATION, ARE CONTEMPORANEOUSLY DOCUMENTED AND THE PERSONNEL & COMPENSATION COMMITTEE REPORTS ON ITS ACTIONS TO THE FULL BOARD OF TRUSTEES. Sesame workshop commissioned its last compensation survey as recently as september of 2020.

Return Explanation
Reference

990 Schedule O, Supplemental Information

PART VI,
SESAME WORKSHOP'S FORM 990 IS AVAILABLE ON ITS WEBSITE (HTTP://WWW.SESAMEWORKSHOP.ORG) AS IS
SECTION C,
LINE 19
SESAME WORKSHOP'S AUDITED FINANCIAL STATEMENTS. THE FORM 990 IS AVAILABLE AT GUIDESTAR.COM.
SESAME WORKSHOP'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON
WRITTEN REQUEST. PART XI. LINE 9 OTHER NON-OPERATING EXPENSES - \$145.254

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SCHEDULE R

As Filed Data -

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

DLN: 93493134026181

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
SESAME WORKSHOP

(Form 990)

Employer identification number

13-2655731 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (e) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (g) (e) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)SESAME STREET INC DE TITLE HOLDING 501(c)(2) n/a SESAME WORKS Yes 1900 Broadway NEW YORK, NY 10023 13-2677928 (2) THE ELECTRIC COMPANY INC TITLE HOLDING DE 501(c)(2) SESAME WORKS n/a Yes 1900 Broadway NEW YORK, NY 10023 13-2722079 (3) JOAN GANZ COONEY CENTER FOR EDUCATION DE 501(c)(3) edu. research sesame works Yes 1900 Broadway NEW YORK, NY 10023 20-8783702 (4)GALLIGALLI SIMSIM EDUCATIONAL INITIATIVE IN edu. media n/a n/a Sesame Works Yes 153 Okhla Industrial Estate Phase III. New Dehli 110020 (5)Sesame Workshop International Inc edu, media NY 501(c)(3) Yes sesame works 1900 Broadway New York, NY 10023 83-1810098 Schedule R (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

I														
(a) Name, address, and EIN of related organization			<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income		( <b>l</b> Disprop alloca	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or aging	<b>(k)</b> Percentage ownership
					<b>'</b>			Yes	No		Yes	No		
Part IV Identification of Related Organization because it had one or more related or						zation ansv	wered "Ye	s" on F	orm 9	990, Part IV	, line	34		
(a) Name, address, and EIN of	<b>(b)</b> Primary activity	(c) Legal		(d) Direct control	(e) ling Type of ent		(f) e of total	Share of	(g) end-of-	-year Percei		Se	(i) ction 512(b)	

Name, address, and EIN of related organization			Direct controlling entity	Type of entity (C corp, S corp, or trust)		Share of end-of-year assets	Percentage ownership	Section 512(b) (13) controlled entity?		
								Yes	No	
(1)CTW COMMUNICATIONS INC  1900 Broadway NEW YORK, NY 10023 13-2422089	HOLDING	DE	SESAME WORKSHOP	C CORP	0	104,186	100.000 %	Yes		
(2)SESAME WORKSHOP INITIATIVES (INDIA) PLC 153 Okhla Industrial Estate phase iii, new dehli 110020 IN	EDUCA. MEDIA	IN	SESAME WORKSHOP	C COrp	0	1,691,040	100.000 %	Yes		
(3)Sesame Street Brand Mgmt & Svc Shanghai room 504 w tower shanghai center no nanjing west road, shanghai 200040 CH	EDUCA. MEDIA	СН	SESAME WORKSHOP	C COrp	0	3,113,409	100.000 %	Yes		
(4)SESAME STREET SEASON 51 PRODUCTIONS INC  1900 broadway new york, NY 10023 84-3808148	video prod.	DE	sesame workshop	c corp	-1,396,077	8,877,592	100.000 %	Yes		
(5)Sesame Street Season 52 Productions Inc 1900 broadway new york, NY 10023 85-1104505	video prod.	DE	sesame workshop	c corp	0	0	100.000 %	Yes		
(6)SESAME SERVICES FP INC  1900 broadway new york, NY 10023 84-4859500	video prod.	DE	sesame workshop	c corp	0	0	100.000 %	Yes		
(7)Sesame Street Japan GK  21st FL Shiroyama Trust Tower Toranomon Minatoku, tokyo 105-6021 JA	EDUCA. MEDIA	JA	SESAME WORKSHOP	C CORP	0	0	100.000 %	Yes		
						Sche	edule R (Form	990) 2	019	

Schedule R (Form 990) 2019						
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.						
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	. 1a	Yes				
<b>b</b> Gift, grant, or capital contribution to related organization(s)	. 1b	Yes				
c Gift, grant, or capital contribution from related organization(s)	. 1c	1	No			
d Loans or loan guarantees to or for related organization(s)			No			
e Loans or loan guarantees by related organization(s)	1e	Yes				
f Dividends from related organization(s)	1f		No			
g Sale of assets to related organization(s)	<b>1</b> g	T	No			
h Purchase of assets from related organization(s)	1h		No			
i Exchange of assets with related organization(s)	1i	1	No			
j Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		No			
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No			
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes				
m Performance of services or membership or fundraising solicitations by related organization(s)		n Yes				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes				
o Sharing of paid employees with related organization(s)	10	Yes				
n. Reimbursement paid to related organization(s) for expenses	10		No			

				1
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10	Yes	_
р	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses	<b>1</b> q	Yes	$\perp$
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
See A	Additional Data Table			
	(a) (b) (c) (d)			

Transaction type (a-s) Name of related organization Method of determining amount involved Amount involved

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate ?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	<b>(j)</b> General ( managin partner	or g ?	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
			1			ı				Schedul	e R (Forn	990	0) 2019

Schedule R (Form 990) 2019							
Part VII	Supplemental Information						
	Provide additional information for responses to questions on Schedule R. (see instructions).						
Return Reference		Explanation					

#### **Additional Data**

(a)

Name, address, and EIN of

related organization

SESAME WORKSHOP INITIATIVES (INDIA)

Sesame Street Brand Mgmt & Svc Shanghai

SESAME STREET SEASON 51 PRODUCTIONS

Sesame Street Season 52 Productions Inc

no nanjing west road, shanghai 200040

room 504 w tower shanghai center

CTW COMMUNICATIONS INC

153 Okhla Industrial Estate phase iii, new dehli 110020

1900 Broadway NEW YORK, NY 10023 13-2422089

PLC

ÍΝ

CH

INC

JA

1900 broadway new york, NY 10023 84-3808148

1900 broadway new york, NY 10023 85-1104505

1900 broadway new york, NY 10023 84-4859500

SESAME SERVICES FP INC

Sesame Street Japan GK

21st FL Shiroyama Trust Tower

Toranomon Minatoku, tokyo 105-6021

Software ID: Software Version:

(b)

Primary activity

HOLDING.

EDUCA. MEDIA

EDUCA, MEDIA

video prod.

video prod.

video prod.

EDUCA. MEDIA

FTN: 13-2655731

(c)

Legal

domicile

(state or foreign

country)

DF

ΙN

CH

DE

DE

DE

JA

Name:	SESAME WORKSHOP
Form 990 Schedule P. Part IV - Identification of Polated Orga	unizations Tayable as a Corporation or Trust

		10 2000/01
	Name:	: SESAME WORKSHOP
_		

(d)

Direct controlling

entity

SESAME

SESAME

SESAME

WORKSHOP

sesame workshop

sesame workshop

sesame workshop

SESAME

WORKSHOP.

workshop.

lworkshop.

(e)

Type of entity

(C corp, S corp,

or trust)

C CORP

(f)

Share of total

income

O

0

0

0

0

0

-1,396,077

(g)

Share of end-of-year

assets

104.186

1,691,040

3.113.409

8,877,592

0

(h)

Percentage

ownership

100.000 %

100.000 %

100.000 %

100.000 %

100.000 %

100.000 %

100.000 %

(i)

Section 512

(b)(13)

controlled

entity? Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

(b) (c) Name of related organization Amount Involved Transaction (d) Method of determining amount involved type(a-s) sesame street brand management М 278,708 cost Joan Ganz Cooney Center for Educational Media L, O, 1,388,388 cost Sesame Workshop India Initiatives PLC М 657,104 cost Sesame Workshop International Inc 1,046,677 cash 305,367 sesame street brand management cash SESAME STREET SEASON 51 PRODUCTIONS INC. 1,614,176 COST

М

Α

10,892,026

42,061

COST

COST

Form 990, Schedule R, Part V - Transactions With Related Organizations

SESAME STREET SEASON 51 PRODUCTIONS INC

SESAME STREET SEASON 51 PRODUCTIONS INC